

COURT ORDER 87-015-01-12

COLLIN COUNTY  
PERSONNEL ACTION FORM

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NAME	COPELAND	RAE	ANN	DATE	12/9/86
LAST	FIRST	MIDDLE		DEPARTMENT:	DISTRICT ATTORNEY
SOCIAL SEC NO	464 29 8065				

EMPLOYMENT	Employment Date	Job Title	SALARY:
	3/2/81		
Previously Employed	Original Employment Date	Separation Date	Supervisor
ELIGIBILITY DATES (For Office Use Only)	Vacation Days	Sick Leave	Insurance (Medical)

Salary and/or title change	Current Job Title	Current Salary	Range	Step
	LEGAL SECRETARY	\$1945.00	R9	F2
	New Job Title	New Salary	Range	Step
	SAME	\$2042.00	R9	G2

Reason ☐ Satisfactory Performance ☐ Unsatisfactory Performance ☐ Exceptional Merit

TRANSFER	FROM	TO	SICK LEAVE	Dates of Sick Leave
LEAVE OF ABSENCE Give Reason	FROM	TO		Previous Days Sick Leave Taken This Year
RETURN	DATE	<input type="checkbox"/> Ins Notified		Was Doctor's Statement Furnished? <input type="checkbox"/> Yes <input type="checkbox"/> No

VACATION	Date Requested - From	To	Total Work Days Away	Previous Days Taken This Year

SEPARATION	Employment Date	Last Day Worked	Rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain
Vac Pay No Hrs	Amt Paid	Comp Pay No Hrs	Amt Paid

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Voluntary Retirement            | <input type="checkbox"/> Return To School                | <input type="checkbox"/> Insubordination                       |
| <input type="checkbox"/> Mandatory Retirement, Co Policy | <input type="checkbox"/> Family Problems                 | <input type="checkbox"/> Reporting Under Influence of Alcohol  |
| <input type="checkbox"/> Death                           | <input type="checkbox"/> Resignation For Other Reasons   | <input type="checkbox"/> Drinking On Duty                      |
| <input type="checkbox"/> Illness or Injury               | <input type="checkbox"/> Reduction In Force              | <input type="checkbox"/> Destruction or Removal Of Co Property |
| <input type="checkbox"/> Leaving Area                    | <input type="checkbox"/> Habitually Absent or Tardy      | <input type="checkbox"/> Falsification of County Records       |
| <input type="checkbox"/> Accept Other Job                | <input type="checkbox"/> Unreported Absence              | <input type="checkbox"/> Misconduct                            |
| <input type="checkbox"/> Dissatisfied                    | <input type="checkbox"/> Leaving Work Without Permission | <input type="checkbox"/> Other (Explain in comments)           |

How Many Days Advance Notice Given? 

COMMENTS

Dated this 12th day of DECEMBER, 1986

C. J. Roberts

COUNTY JUDGE

EFFECTIVE DATE: 1/1/87

DATE

DATE

DATE

EMPLOYEE (IF APPLICABLE)

DEPARTMENT HEAD

PERSONNEL DIRECTOR